

**Bible Baptist Christian Academy** 889 GA Highway 24 Statesboro, GA 30461

912-764-5615 www.mybbca.org

## **Community Service Verification Form**

Student Name		Grade
Graduation Year	Date of Birth	Phone #
Name of Community Services Site	е	Site Phone Number
Please describe the duties	the student performed:	
Number of Hours complete	ed for Community Service: _	<del></del>
Name of Contact Person that sup	ervised student community service	e (please print)
Signature of Contact Person Veri	fying service was completed	 